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U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875							Application or Docket Number 09/662,222			ing Date 14/2000	To be Mailed	
	Al	PPLICATION .	AS FILE		OTHER THAN SMALL ENTITY OR SMALL ENTITY							
Т	FOR	N	NUMBER FILED		NUMBER EXTRA		RATE (\$)	FEE (\$)		RATE (\$)	FEE (\$)	
	BASIC FEE (37 CFR 1.16(a), (b),	or (c))	N/A		N/A		N/A		1	N/A		
	SEARCH FEE (37 CFR 1.16(k), (f), r	or (m))	N/A		N/A		N/A			N/A		
	EXAMINATION FE (37 CFR 1.16(o), (p),		N/A		N/A		N/A			N/A		
	FAL CLAIMS CFR 1.16(i))		minus 20 =		•		x s =		OR	x \$ =		
	EPENDENT CLAIM CFR 1.16(h))		minus 3 = *			l	× \$ =			x \$ =		
	APPLICATION SIZE (37 CFR 1.16(s))	FEE shee is \$2 addi	ts of pape 50 (\$125 ional 50 s	er, the applicat for small entity sheets or fracti	ings exceed 100 tion size fee due y) for each on thereof. See 7 CFR 1.16(s).							
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(j))									J			
* If the difference in column 1 is less than zero, enter "0" in column 2.							TOTAL]	TOTAL		
APPLICATION AS AMENDED – PART II OTHER THAN (Column 1) (Column 2) (Column 3) SMALL ENTITY OR SMALL ENTITY												
AMENDMENT	03/11/2008	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)	
	Total (37 CFR 1.16(i))	• 43	Minus	·· 48	= 0		X \$25 =	0	OR	x s =		
	Independent (37 CFR 1,16(h))	• 3	Minus	3	= 0	1	X \$105 =	0	OR	x \$ =		
	Application Size Fee (37 CFR 1.16(s))											
4	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))								OR			
							TOTAL ADD'L FEE	0	OR	TOTAL ADD'L FEE		
(Column 1) (Column 2) (Column 3)												
		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)	
Ä	Total (37 CFR 1 16(1))	*	Minus	**	=	1	x s =		OR	x \$ =		
M	Independent (37 CFR 1.16(h))	•	Minus	***	=	1	x \$ =		OR	x \$ =		
AMENDMENT	Application Size Fee (37 CFR 1.16(s))											
AM	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))								OR			
* If the only in column 1 is less than the only in column 2 write "(" in column 2							TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE		
** If	"If the othry in column 1 is less than the entry in column 2, write "O" in column 3. Legal Instrument Examiner: "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20". "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3". The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.											

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